

COMMONWEALTH OF VIRGINIA  
DEPARTMENT OF TRANSPORTATION

**SIGN INVENTORY SHEET**

Project \_\_\_\_\_ Contract ID No. \_\_\_\_\_

| Type Sign | Size  | Cost Each | Quantity Issued | Quantity Returned | Date Returned |
|-----------|-------|-----------|-----------------|-------------------|---------------|
| _____     | _____ | _____     | _____           | _____             | _____         |
| _____     | _____ | _____     | _____           | _____             | _____         |
| _____     | _____ | _____     | _____           | _____             | _____         |
| _____     | _____ | _____     | _____           | _____             | _____         |
| _____     | _____ | _____     | _____           | _____             | _____         |
| _____     | _____ | _____     | _____           | _____             | _____         |
| _____     | _____ | _____     | _____           | _____             | _____         |
| _____     | _____ | _____     | _____           | _____             | _____         |
| _____     | _____ | _____     | _____           | _____             | _____         |
| _____     | _____ | _____     | _____           | _____             | _____         |

| Type Signholder | Cost Each | Manufacturer or Model # | Quantity Issued | Quantity Returned | Date Returned |
|-----------------|-----------|-------------------------|-----------------|-------------------|---------------|
| _____           | _____     | _____                   | _____           | _____             | _____         |
| _____           | _____     | _____                   | _____           | _____             | _____         |
| _____           | _____     | _____                   | _____           | _____             | _____         |
| _____           | _____     | _____                   | _____           | _____             | _____         |
| _____           | _____     | _____                   | _____           | _____             | _____         |

I, the Contractor/Representative, accept full responsibility for the above identified traffic control items in accordance with the Specifications. Upon completion of my company's work on this project, these items will be returned to the Department.

\_\_\_\_\_  
Contractor/Representative

\_\_\_\_\_  
Date

\_\_\_\_\_  
VDOT Representative

\_\_\_\_\_  
Date

Copy-Residency Administrator  
Contractor/Representative